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TC 1700



Attorney's Docket No. 033235-009

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Pat	ent Application of)						
Hideo Al	KIMOTO et al.	Group Art Unit: 1732						
Applicati	on No.: 09/988,596	Examiner: Allan R. Kuhns						
Filed: 1	November 20, 2001	Confirmation No.: 8917						
7	FOAMED ARTICLE OF) THERMOPLASTIC RESIN) COMPOSITION AND PROCESS FOR) PRODUCING IT)							
	AMENDMENT/REPLY TR	ANSMITTAL LETTER						
P.O. Box	sioner for Patents c 1450 ria, VA 22313-1450							
Sir:								
Encl	osed is a reply for the above-identified pate	ent application.						
[]	[] A Petition for Extension of Time is also enclosed.							
[]	[] A Terminal Disclaimer and the [] \$55.00 (2814) [] \$110.00 (1814) fee due under 37 C.F.R. § 1.20(d) are also enclosed.							
[]	Also enclosed is/are							
[]	Small entity status is hereby claimed.							
[]	Applicant(s) requests continued examination under 37 C.F.R. § 1.114 and enclose the [] \$385.00 (2801) [] \$770.00 (1801) fee due under 37 C.F.R. § 1.17(e).							
	[] Applicant(s) requests that any previously unentered after final amendments <u>not</u> be entered. Continued examination is requested based on the enclosed documents identified above.							
	[] Applicant(s) previously submitted requested.	_, on, for which continued examination is						
	does not exceed three months from t	action by the Office until at least, which he filing of this RCE, in accordance with fee under 37 C.F.R. § 1.17(i) is enclosed.						

Amendment/Reply Transmittal Letter Application No. <u>09/988.596</u> Attorney's Docket No. <u>033235-009</u> Page 2

- A Request for Entry and Consideration of Submission under 37 C.F.R. § 1.129(a) (1809/2809) is also enclosed.
- [X] No additional claim fee is required.
- [] An additional claim fee is required, and is calculated as shown below:

	No. OF CLAIMS	HIGHEST NO. OF CLAIMS PREVIOUSLY PAID FOR	EXTRA CLAIMS	RATE	Add'l Fee
Total Claims	20	MINUS 22 =	0	× \$18.00 (1202) =	\$0.00
Independent Claims	1	MINUS 3 =	0	× \$86.00 (1201) =	0.00
If Amendment adds m	ultiple depend	lent claims, add \$29	00.00 (1203)		
Total Claim Amendme	0.00				
If small entity status is	s claimed, sub	tract 50% of Total	Claim Amend	ment Fee	
TOTAL ADDITIONA	AL CLAIM I	CEE DUE FOR TH	IS AMENDN	ÆNT	\$0.00